MAR - 7 2012



# 510(K) SUMMARY PIERRE FABRE DEXERYLIM CREAM

### SUBMITTER AND OWNER

Pierre Fabre Medical Devices Les Fontaines 29 avenue du Sidobre 81106 Castres Cedex France

Attn.: M. Pascal Lefrançois

Date Prepared: 30 January 2012

#### **DEVICE NAME**

Trade Name:

DEXERYL™ Cream

Common Name:

Wound dressing

Classification Name:

Dressing, Wound, Drug

Regulation No.:

Unclassified

Procode:

FRO

### PREDICATE DEVICES

DEXERYL<sup>TM</sup> Cream is substantially equivalent in composition and intended use to the following legally marketed devices in commercial distribution:

- Tropazone Cream (K093544),
- Neosalus (K090585),
- Tetrix Cream (K071483),
- EpiCeram (K052643) and
- Biafine (K964240).

#### **DEVICE DESCRIPTION**

DEXERYL<sup>TM</sup> Cream is a clean but non-sterile skin emollient designed to provide protection and a moist environment to the skin, which is beneficial to the healing process. DEXERYL<sup>TM</sup> Cream is an oil in water emulsion, consisting of >50% water with glycerin, white soft paraffin, liquid paraffin, and other common excipients.

The device formulation therefore confers an emollient effect, softening and soothing the skin to help prevent dry skin, irritation and itching. DEXERYL™ Cream is a prescription device.

K 113807

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Pierre Fabre

MEDICAL DEVICES

### INTENDED USE

DEXERYL<sup>TM</sup> Cream is indicated to manage and relieve the burning and itching experienced with various types of dermatoses including atopic dermatitis, allergic contact dermatitis and irritant contact dermatitis. DEXERYL<sup>TM</sup> Cream provides a moist environment, which is beneficial to the healing process.

## **COMPARISON OF TECHNOLOGICAL FEATURES**

DEXERYL<sup>TM</sup> Cream is similar in design, intended use, and technological characteristics to the predicate devices and existing wound dressings that have been cleared for US commercial distribution. The device is an emulsified semi-viscous cream intended for topical use, similar to the predicate devices in composition and in intended use.

### SUMMARY OF TESTING DATA

Device safety has been demonstrated through biocompatibility testing in conformance with recommendations of ISO 10993-1, and clinical testing and extensive clinical use in Europe. The minor differences in material constituents between DEXERYL<sup>TM</sup> Cream and the predicates are adequately addressed by the testing completed on the product and the clinical experience with the device.





Food and Drug Administration 10903 New Hampshire Avenue Document Control Room –WO66-G609 Silver Spring, MD 20993-0002

Pierre Fabre Medical Devices % The Weinberg Group, Inc. Diane Horwitz, Ph.D. 1129 Twentieth Street, Northwest Washington, District of Columbia 20036

MAR - 7 2012

Re: K113807

Trade/Device Name: DEXERYL<sup>™</sup> Cream

Regulatory Class: Unclassified

Product Code: FRO

Dated: December 22, 2011 Received: December 23, 2011

### Dear Dr. Horwitz:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set

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forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to <a href="http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm">http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm</a> for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to

http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

Sincerely yours,

Mark N. Melkerson

Director

Division of Surgical, Orthopedic and Restorative Devices Office of Device Evaluation Center for Devices and Radiological Health

**Enclosure** 

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# INDICATIONS FOR USE

510(k) Number (if known): K	113807	
Device Name: <u>DEXERYL™ Cre</u>	am	· 
Indications for Use:		
with various types of dermatoses i	ncluding atopic de	ieve the burning and itching experienced ermatitis, allergic contact dermatitis and ovides a moist environment, which is
Prescription Use X	AND/OR	Over-The-Counter Use
(Per 21 CFR 801 Subpart D)		(21 CFR 807 Subpart C)
(PLEASE DO NOT WRITE BELOW 1	HIS LINE – CONT	TINUE ON ANOTHER PAGE IF NEEDED
Concurrence of Cl	ORH, Office of De	evice Evaluation (ODE)

(Division Sign-Off)
Division of Surgical, Orthopedic, and Restorative Devices

510(k) Number K 1 3807